

International Osteology Symposium in Monaco Possibly Making Regeneration Easier?

Some of the most critical issues surrounding oral regeneration are going to be analyzed at the International Osteology Symposium from May 2-4, 2013 in Monaco. The major challenges are: Can regenerative therapies be made to be easier and less invasive? What strategies are available to combat the pressing issue of "peri-implantitis"? Both congress chairmen Niklaus P. Lang, Switzerland and Massimo Simion, Italy provide a unique insight into the program.

The theme of the congress is "Decision Making with Oral Tissue Regeneration". Why is the focus on decisions?

Niklaus P. Lang: In dental practice it is always a matter of having to take decisions. For instance: Do you extract a tooth or do you retain it? By what criteria should you decide? Practitioners often choose a strategy for therapy intuitively based on their familiarity with certain procedures. But the scientific evidence for one therapy option or another actually ought to take centre stage. That is what we want to impart.

Massimo Simion: At the same time we are still experiencing a lack of high-quality data for specific clinical situations. For this reason you so frequently read the conclusion in metaanalyses that more studies are still needed. Notwithstanding, we need to treat our patients and take decisions. In such unclear situations the views of experts are sought after - they know the literature on one hand and possess a great deal of clinical experience on the other. This benefits congress attendees greatly because it provides them with an orientation.

Virtually all indications for oral regeneration are covered in the programme. Which ones are especially important to you?

Niklaus P. Lang: The whole Saturday is dedicated to the topic of peri-implantitis. Dentists often prefer to place an implant than to preserve a periodontally compromised tooth. This

might then give rise to peri-implant complications in some cases. At the symposium we concern ourselves with the problem of these infections relating to the oral cavity environment as a whole and that they also need to be treated "holistically".

Massimo Simion: Apart from bacteria, the manner in which an implant is placed and the implant surface also appear to play a role, although it has not yet been definitely possible to demonstrate the latter. There are also patient factors which have an impact, such as smoking or specific diseases. It is key for dentists and oral surgeons to be aware of all these factors and learn how to diagnose and treat peri-implantitis early. The answers to many questions are already close at hand. That is why we have devoted so much space to the topic at the congress.

And bone regeneration - can we now assume that everyone knows all there is to know about this subject?

Massimo Simion: We perform GBR procedures on an almost daily basis - to enhance aesthetics, to treat angular bone defects and so on. But how can GBR be made easier and less invasive? When, for instance, is it possible to dispense with autologous bone or a non-absorbable membrane which is difficult to handle? Or: How can you prevent bone resorption directly after a tooth has been extracted and so facilitate subsequent implant placement? Current questions for daily practice, like these, are being discussed at the congress.

One session will concern itself with "patient reported-outcome measures". What does that involve?

Niklaus P. Lang: To assess therapy success, we often only gauge objective parameters such as implant survival rate or bone level. But it is also important whether the patient is at ease with the function and the aesthetics or whether treatment involves a lot of pain or swelling. For a long time such subjective parameters were neglected in implantology.

Does soft tissue have a large role to play in aesthetics?

Massimo Simion: The quality and quantity of soft tissue is vital for aesthetics, but for function too. For example, the amount of keratinized gingiva around an implant seems to have an effect on recession development and the risk of peri-implantitis.

Many dentists hesitate to harvest a graft from the palate because the procedure is invasive and painful. Soft tissue substitute products are such an interesting alternative for this reason. At the congress we will be taking a close look at when they can be used. They are very well suited to some indications, but not to others.

Short and sweet: the three key reasons for your colleagues to come to the Monaco Osteology Symposium.

Niklaus P. Lang: At this time of the year Monaco is beautiful and the programme speaks for itself. It is well balanced, featuring both young and established colleagues. Some focus more on empirical practice, others more on the science. This mix is essential for us, for they go hand in hand. And last but not least, the Osteology Foundation will be celebrating its ten years in operation in Monaco. Nobody should miss this.

Interview: Verena Vermeulen

More information under www.osteology-monaco.org

Professor Massimo Simion is Professor for Periodontology and Co-Chairman of the Department of Periodontics and Dental Implant Rehabilitation of the Dental Clinic of the University of Milan. His chief interest lies in Guided Bone Regeneration and Osseointegration. He is a member of the Osteology Foundation Board.

Niklaus P. Lang is Professor of Periodontology and the holder of numerous prizes. At over 500 publications, he is one of the most prominent international periodontists. He is Editor-in-Chief of various international journals, such as Clinical Oral Implants Research and a member of the Osteology Foundation Board.